

Application Data Sheet**Application Information**

Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD disks::	
Number of Copies of CDs::	
Sequence Submission?::	None
Computer Readable Form (CRF)::	No
Number of copies of CRF::	0
Title::	TERA-HERTZ WAVE TRANSMITTING OPTICAL COMPONENT, TERA-HERTZ WAVE OPTICAL SYSTEM, TERA-HERTZ BAND WAVE PROCESSING DEVICE AND METHOD
Attorney Docket Number::	8075-1017
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	6
Small Entity?::	No
Latin Name::	
Variety Denomination Name::	
Petition Included?::	No
Petition Type::	
Licensed US Gov't Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	No

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: JAPAN  
Status:: Full Capacity  
Given Name:: HIROAKI  
Middle Name::  
Family Name:: MINAMIDE  
Name Suffix::  
City of Residence:: SENDAI-SHI  
State or Province of  
Residence::  
Country of Residence:: JAPAN  
Street of Mailing 519-1399, AZA-AOBA  
Address:: ARAMAKI, AOBA-KU, MIYAGI  
City of Mailing Address:: SENDAI-SHI  
State or Province of Mailing Address::  
Country of Mailing Address:: JAPAN  
Postal or Zip Code of Mailing Address:: 9800845

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: JAPAN  
Status:: Full Capacity  
Given Name:: HIROMASA  
Middle Name::  
Family Name:: ITO  
Name Suffix::  
City of Residence:: SENDAI-SHI  
State or Province of  
Residence::  
Country of Residence:: JAPAN  
Street of Mailing 519-1399, AZA-AOBA  
Address:: ARAMAKI, AOBA-KU, MIYAGI  
City of Mailing Address:: SENDAI-SHI

State or Province of Mailing Address::  
Country of Mailing Address:: JAPAN  
Postal or Zip Code of Mailing Address:: 9800845

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: JAPAN  
Status:: Full Capacity  
Given Name:: AKITO  
Middle Name::  
Family Name:: KUDO  
Name Suffix::  
City of Residence:: SENDAI-SHI  
State or Province of  
Residence::  
Country of Residence:: JAPAN  
Street of Mailing 6-3, MINAMI-YOSHINARI 6-CHOME  
Address:: AOBA-KU,MIYAGI  
City of Mailing Address:: SENDAI-SHI  
State or Province of Mailing Address::  
Country of Mailing Address:: JAPAN  
Postal or Zip Code of Mailing Address:: 9893204

**Correspondence Information**

Correspondence Customer 00466  
Number::

**Representative Information**

Representative Customer	00466
Number::	

**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	National Stage of	PCT/JP2004/005137	4/9/04

**Foreign Priority Information**

Country::	Application Number::	Filing Date::	Priority Claimed::
JAPAN	2003-107885	4/11/03	Yes

**Assignment Information**

Assignee Name::

Street of Mailing

Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::